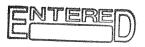
Type of Inspection
New 🗆
Annual 🛣
Follow-Up
(Prev. Inspection Date)
Complaint
Courtesy
Random

NCDA&CS, VETERINARY DIVISION ANIMAL WELFARE SECTION 1030 MAIL SERVICE CENTER, **RALEIGH, NC 27699-1030** PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR 📈 BOTH  $\square$ 



## ANIMAL WELFARE INSPECTION

GPS Coordinates - N:	35.59872	w: 82.	47516
----------------------	----------	--------	-------

GPS Coordina	ites - N:	W: 1			
LICENSE #: 10497 TYPE FACILITY: Animal BUSINESS NAME: 500 OWNER: Name 1 ADDRESS: [22 Lower TELEPHONE: (628) 29 VMO Asster COUNTY Bacomba	st Cats Downer er Grassy Brane 8-6868	-h RD Asheville	NC	Public Auction	
Number of Primary Enclosu	ires	Animals Present: Dogs	<i>D</i>	Cats	
SaryStames 119-830-1712	Circle ea	K" in each box, if adequanch item number, if inade if not applicable			
STRUCTURE	SANI	ΓΑΤΙΟΝ	SPEC	IAL ITEMS	
Housing Facilities  1. Structure & Repair 2. Ventilation & Temp. 3. Lighting 4. Ceiling, Wall, Floors 5. Storage 6. Water Drainage	》 12. 以13. 以14. 以15. 以16.	Waste Disposal Odor Ceiling, Wall, Floors Primary Enclosures Equipment & Supplies Washrooms, Sinks, Basins Insect/Vermin Control Building & Grounds	≱24. ₹25. ₹26.	Description of Animals Records/Vet Treatment Origin/Disposition Signature (boarding kennel) Written permission from owner for commingling (doggie daycare)	
Primary Enclosures  ★7. Structure & Repair  ★8. Space  ★9. Ventilation & Temp.  ★10. Adequate Shelter	×19. ×20. ×21. ×9422.	Adequate Feed/Water Food Storage Personnel Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area Animals' Appearance	<u>Veteri</u> <b>¥</b> 28.	portation Care in Transit Discussed  nary Care Isolation Facility No Signs of Illness/ Treated	
APPROVED D	ISAPPROVED Date	1-7-08	_1 mic	2:00	
Tury Stan	y.	navey Nowne			
AW-2 Rev. 1/07 Whit	s <b>Signature</b>	Canary= Inspector	Wner/Autno	rized Agent's Signature	

PAGE / OF /